



September 26, 2017

House Health Policy Committee
Michigan House of Representatives
P.O. Box 30014
Lansing, MI 48909

Dear Chair Vaupel and Members of the House Health Policy Committee:

On behalf of the Epilepsy Foundation and our local affiliate, Epilepsy Foundation Michigan, we urge you to consider the impact that Senate Bill 166 could have on access to epilepsy medications. We encourage you to amend the bill to exempt scheduled medications prescribed for epilepsy from the state prescription drug monitoring program. People living with epilepsy do not abuse their medications, and without these treatments, they are at risk of breakthrough seizures, significant medical complications and expenses, and even death.

The Epilepsy Foundation is the leading national voluntary health organization that speaks on behalf of at least 3.4 million Americans with epilepsy and seizures, including 108,900 living in Michigan. We foster the wellbeing of children and adults affected by seizures through research programs, educational activities, advocacy, and direct services. Epilepsy is a medical condition that produces seizures affecting a variety of mental and physical functions. Approximately 1 in 26 Americans will develop epilepsy at some point in their lifetime. For people living with epilepsy, timely access to appropriate, physician-directed care, including epilepsy medications, is a critical concern. Epilepsy medications are the most common and cost effective treatment for controlling and/or reducing seizures. To delay, change, limit, or deny access to medications could be extremely dangerous.

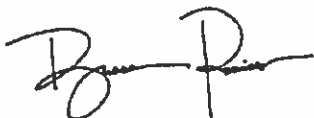
We appreciate that the state's prescription drug monitoring program as a valuable tool in combating the opioid abuse epidemic. Unfortunately, including epilepsy medications, several of which are on Schedule V that by definition do not have the same abuse properties as other scheduled medications, would limit availability of these lifesaving therapies. The requirements associated with the prescription drug monitoring program can lead to delays in access. Also, the reporting and query requirements may discourage some physicians from treating epilepsy patients or from prescribing the most appropriate medication. Further, we have privacy concerns with a registry program of this type, especially because it is unjustified for people living with epilepsy. The Epilepsy Foundation has continually advocated for exemption of non-opioid, epilepsy medications from state prescription drug monitoring programs to ensure timely access to lifesaving therapies.

Epilepsy medications show limited potential for abuse, yet they play a critical role in the management of seizures and epilepsy. While we are not aware of any research to suggest people with epilepsy abuse their epilepsy medication, we do know firsthand the dramatic consequences of delaying or restricting access to epilepsy medications. People living with epilepsy who experience a delay in accessing their medication due to onerous drug monitoring requirements


are at a high risk for developing breakthrough seizures and related complications, including death. Breakthrough seizures also lead to increased medical costs, lost wages and diminished productivity, not just for the individuals living with epilepsy but also their families and communities.

We urge you to amend SB 166 to ensure that people living with epilepsy are able to access the lifesaving medications without unnecessary, dangerous barriers to care. Exempting scheduled medications when prescribed to treat epilepsy is a simple way to ensure access and privacy while still addressing prescription drug abuse via the monitoring program. Please do not hesitate to contact Angela Ostrom, Chief Legal Officer and Vice President Public Policy at our national office at 301-918-3766 or aostrom@efa.org with any questions.

Sincerely,



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President
Epilepsy Foundation of Michigan



Philip M. Gattone, M.Ed.
President & CEO
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